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CONFIRMATION NO. 6061

<b>SERIAL NUMBER</b> 10/808,693	<b>FILING OR 371(c) DATE</b> 03/25/2004 <b>RULE</b>	<b>CLASS</b> 600	<b>GROUP ART UNIT</b> 3737	<b>ATTORNEY DOCKET NO.</b> MPK-00108
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**APPLICANTS**  
 Martin R. Prince, Ann Arbor, MI;

**\*\* CONTINUING DATA \*\*\*\*\***  
 This application is a CON of 09/899,353 07/05/2001 PAT 6,889,072 which is a CON of 09/061,101 04/16/1998 PAT 6,278,892. *PL*  
 which is a CON of 08/705,818 08/30/1996 PAT 5,762,065 *PL*  
 which is a CON of 08/378,384 01/25/1995 PAT 5,553,619 *PL*  
 which is a CIP of 08/071,970 06/07/1993 PAT 5,417,213 *PL*

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**  
**\*\* 06/07/2004**

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature <i>PL</i> Initials <i>PL</i>	<b>STATE OR COUNTRY</b> MI	<b>SHEETS DRAWING</b> 9	<b>TOTAL CLAIMS</b> 20	<b>INDEPENDENT CLAIMS</b> 2
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**ADDRESS**  
25181

**TITLE**  
Method and apparatus for administration of contrast agents for use in magnetic resonance arteriography

<b>FILING FEE RECEIVED</b> 770	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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